## Vanderburgh County Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>07/01/2011</u>	Address:	<u>626 E MARYLAND</u>
Case #:	11-13019		EVANSVILLE,IN
County:	<u>VANDERBURGH</u>		<u>47711</u>
Type of L	aboratory Seizure (check one)	Seizure Location (	check all that apply)
Chemic	ional Lab cal/Glassware/Equipment (only) ite (only)	<ul><li>☐ Residence</li><li>☐ Outbuilding</li><li>☐ Vehicle</li></ul>	☐ Hotel/Motel ☐ Open – No Structure ☐ Other:
(check all t	nd: Location (bedroom, kitchen, open a hat apply) n/Ammonia Reaction(s): <u>ATTIC UPS</u>		
Red Ph	osphorous/Iodine Reaction(s):		
Flammable Solvents: <u>UPSTAIRS</u>			
Water Reactive Metal (Lithium):			
Hydroc	chloric Acid Gas Generator(s):		
Anhyd	rous Ammonia:		
⊠ Corros	ive Acid: <u>UPSTAIRS</u>		
⊠ Corrosi	ive Base: <u>UPSTAIRS</u>		
Other (	item and location):		
Yes No Childre Living con Estimated Additional	er age 18 discovered (check appropriation (number present)  en not present but evidence they reside editions of home: clean disarrately clean the disarrately clean to the fall arriver and the fall arriver and the fall arriver are contact.	or visit often y  unclean n occurring:	
-	rt has been faxed to the following ag		
Health Dep	partment: YES partment: YES nt of Child Services:	Fax: <u>8124</u> Fax: <u>8124</u> Fax:	355871
	information regarding this methamph	_ ·	contact

<sup>\*\*</sup> This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of scene processing.